CHAPTER 2

RELIGIOUS PROGRAM SUPPORT PART II

As we explained in chapter 1, the area of religious program support is so broad that we have divided this subject into two parts. In chapter 1, we covered the basic aspects of worship and presented this information as Part I. In this chapter, Part II, you will study the other aspects of religious program support, such as pastoral care and counseling, fellowship, outreach, special events and programs, and general support. In your career as a Religious Program Specialist (RP), your duties and responsibilities in these areas will be just as important as those for worship.

After studying the information in this chapter, you should be able to identify the fundamentals of religious program support in the areas of pastoral care, counseling, fellowship, outreach, special events and programs, and general support. You should also be able to identify the ways in which you, the RP, will be responsible for carrying out basic duties and responsibilities in these important areas.

PASTORAL CARE AND COUNSELING

A Navy chaplain is an ordained clergy member as well as a commissioned staff officer. Chaplains provide worship in their own faith and are accountable for furthering the free exercise of religion for those of other faiths. This includes not only rites but also pastoral care and counseling.

Because of their life-styles, Navy and Marine Corps personnel and their families are subjected to special demands. These demands may be in the form of frequent readjustments, self-sufficiency on the part of the spouse and other family members, family separations, deployments, detachments, resettlements, budget pressures, and the stresses of being a single parent. All these may cause Navy and Marine Corps personnel and their families to experience feelings of being overwhelmed. To help our people handle these stresses, chaplains are available for pastoral service to active duty and retired personnel, military family members, and Department of Defense civilians and their families. Naturally, a chaplain's primary obligation will be to the active duty service member.

In many of these areas, the role of the RP is to provide support in a variety of ways to the chaplains who

provide pastoral care and counseling. If assigned to a chaplain in these areas, you will be expected to provide support by anticipating and preparing for events, visits, and occurrences; screening personnel who are seeking assistance; maintaining a complete local referral directory; assisting distraught persons; escorting chaplains during family home visits; and preparing daily census reports on unit personnel in the hospital and brig. In the following paragraphs, let's take a look at each of these areas.

PREPARING FOR EVENTS, VISITS, AND OCCURRENCES

As an RP, you may discover that your direct involvement with pastoral care and counseling of Navy and Marine Corps members and their families will be minimal. Always be aware that your primary role is to provide support for your chaplain who must render these services. In many ways, your job is every bit as important because you must prepare for the event, the visit, or occurrence so your chaplain can carry out his or her responsibilities.

You may even experience frustration because you will not always be informed about the purpose of the visit or event for which you must prepare. Often, confidentiality governs the extent of the circumstances about which you will be informed. Remember, it is not necessary for you to know the purpose of the situation to carry out your basic responsibilities. You may, however, ask questions or even request your chaplain to advise you concerning any circumstances that might help you provide the best possible service. For example, you may need certain information about a client that will help you do a better job in preparing for the visit or event. Is a child involved? Is the client advanced in age? Is the client blind, deaf, developmentally disabled, confused, or unable to speak English? Is the client dealing with stress or burnout? These are facts you have a right to know. If you are aware of some of the facts regarding the client's visit or circumstances, you will be better equipped to provide the best environment for both the client and your chaplain.

Children

When a child or children are involved in a pastoral counseling situation, you may be called upon to make special accommodations. You may have to "watch" or "entertain" the child. You may have to work around the child, talking to the child while you are working. Storytelling, game playing, or picture drawing are good methods you can use to establish rapport with children.

Elderly Persons

In dealing with an aged or geriatric client, you must be especially sensitive to several potential needs. You must also remember to try to demonstrate your sensitivity in a way that will not appear to be condescending to the person. In dealing with older clients, you may find some of the following techniques very useful:

- Carefully identify yourself to avoid confusion. When first addressing the person, use his or her title (Mr., Mrs., Ms., Miss, or rank) and last name. (You can use the first name later, if the client requests.)
 - Do not assume senility or lack of understanding.
- Watch for signs of a hearing deficiency; speak directly if you need to be heard, but do not shout.
 - Allow extra time for responses.
- Ask the person what will make him or her comfortable.
 - Maintain eye contact.
 - Avoid stereotyping.

Advanced age is only one of many special circumstances you may have to consider. Other conditions about which you must be aware are physical and mental handicaps.

Blind Persons

In dealing with a blind person, you should first determine whether he or she has a hearing impairment. You must do this without shouting or whispering. Maintain contact by lightly resting your hand on the person's forearm. Explain approaches and maneuvers in detail before you do them. Identify the source of any strange noises. Most of all, be considerate, compassionate, and supportive.

Deaf Persons

In dealing with a person whom you know or assume to be deaf, first get the person's attention before you speak. You can do this by gently tapping the person on the shoulder or waving your hand where it can be seen. You must maintain eye contact. You must be especially courteous. Try to determine if the person can read lips, Even then, be aware that the person will probably understand only 30 to 40 percent of the conversation. You must realize that lipreading will be more difficult for the person if you have a foreign accent or wear a mustache. Face the person while you are speaking, then speak slowly and clearly. Even if you determine that the person cannot read lips, speak as you gesture or use signs. If possible, get an interpreter who can communicate in sign language. Try pantomiming and using broad gestures. Figure 2-1 illustrates some common signs you can use to communicate with deaf clients. Do not shout: if the person has partial hearing and is wearing a hearing aid, you could distort his or her hearing. Finally, use written messages. If the person has been deaf since birth, he or she may not understand some grammatical combinations; therefore, keep it simple.

Non-English Speaking Persons

Eventually, you will find yourself in the position of having to communicate with a person who does not speak English. Regardless of the person's native language, try communicating in English first. Show the person your ID card with your picture to establish your identity. If possible, use an interpreter or try to find a common language. If you speak a language other than English, try using it. Use gestures and signs. Speak slowly and clearly in English; the person will probably know some words and phrases. Most importantly, do not shout.

Confused or Developmentally Disabled Persons

In speaking with people who are especially confused or who have some kind of developmental disability, such as mental retardation, you should begin by determining the person's level of understanding. You can do this by asking questions. Speak at an appropriate level and wait for a delayed response when it is the person's turn to answer or respond. Have patience. Be discrete if the person's condition should be the reason for the visit or event. Use the word disability instead of a potentially offensive word to describe the person's condition. Speak as you would to any adult, even if it is necessary to reexplain something. You must speak

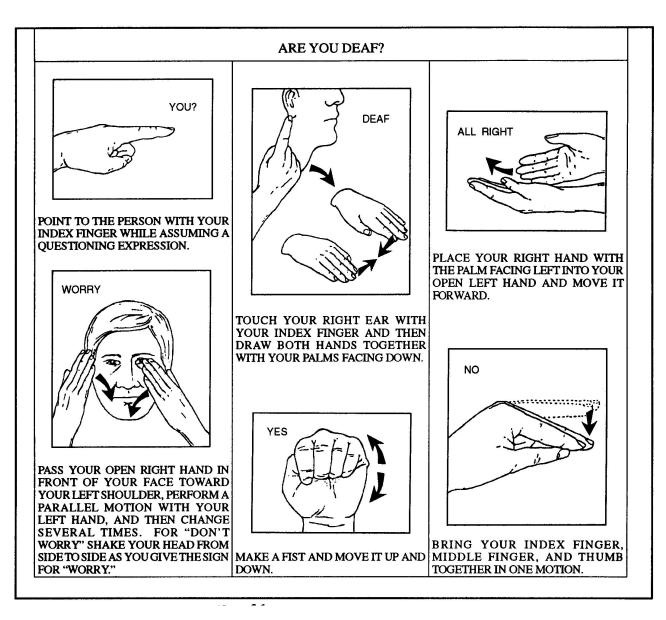


Figure 2-1.—Communicating with a deaf person.

slowly, distinctly, and then listen carefully. Above all, a caring concern.

Victims of Stress and Burnout

No one is immune to the symptoms of stress or burnout. Be aware of these symptoms. Remember, not even you, the RP, will be immune to these situations. Stress may cause even you to experience a wide range of feelings, some of which can be quite unpleasant. A person suffering from stress or extreme burnout may exhibit feelings and characteristics such as irritation, anxiety, becoming defensive at implications, or sadness in response to tragedy or even normal events. Although these feelings are natural, you must work at understanding and recognizing them in yourself, your co-workers, and the clients who enter the RMF. Helping others to

remain poised and calm is part of your show beneficial role as an RP.

STRESS.— First you must realize that emotions and reactions are normal. As an RP, you will be dealing not only with the client's emotions but also your own responses to stressful situations. In coping with stressful situations, each of us can learn to respond in an effective way. Try the following techniques in handling stress:

- Develop a buddy system with a co-worker.
 Keep an eye on each other and suggest when breaks are advisable.
- Encourage and support your co-worker by making positive remarks and avoiding the temptation to criticize.

- Periodically take a break to get some exercise.
- If you can, eat frequently but in small amounts.
- Use humor to break the tension and provide relief.
- Use relaxation techniques like taking a deep breath, holding it, and then blowing the breath out forcefully.
- Use positive self-talk.
- When you find your effectiveness diminishing, take a break.
- Seek professional help, particularly after handling a life-threatening occurrence, or when you feel you are losing control and cannot cope.

Whether you are dealing with a co-worker, a client, or yourself, you are responsible for recognizing symptoms of stress and taking care of them properly just as you would for any other health- or lifethreatening condition.

BURNOUT.— The burnout syndrome is defined as a state of emotional exhaustion, skepticism, irritability, and fatigue that results from persistent stress and worry. In their desire to help meet the needs of other people, chaplains and RPs may be especially at risk of assuming devastating personal stress. The best way to prevent burnout is to expect it, to be alert to its early signs, and to act promptly in relieving the stress.

Figure 2-2 identifies five common symptoms of burnout. Your first step is to be aware of these symptoms when they appear. The earlier you recognize

SYMPTOMS AND MANIFESTATIONS OF BURNOUT				
THINKING:	BODILY COMPLAINTS:			
Inability to concentrate	Persistent physical exhaustion			
Slowness of thought	Headaches			
Inability to make judgments and decisions	Loss of emotional and physical energy			
Loss of ability to recognize alternatives or prioritize tasks	Gastrointestinal distress			
Loss of objectivity in evaluating and functioning	Loss of sexual drive and/or interest			
Loss of motivation for job	Appetite disturbances			
Attempts to block change	Hypochrondia			
Failure to make contributions	Sleep disorders (frequent insomnia and nightmares are common)			
PSYCHOLOGICAL:	Tremors			
Depression	SOCIAL:			
Irritability	Decrease in ability to relate to other individuals. especially in a caring, constructive, and friendly manner			
Anxiety Hyperexcitability	Decrease in social activities Increased interpersonal conflicts with co-workers			
Negative "self-talk" (using negative labels to describe self) Excessive anger and reactions	Chronic feelings of decreased worth			
Negativism	BEHAVIORAL:			
Feelings of not being appreciated	Hyperactivity			
	Overeating			
	Excessive fatigue			

Figure 2-2.—Symptoms of burnout.

these symptoms, the better off you and your co-workers will be.

All RPs and chaplains need to be able to recognize the early symptoms of burnout, not only in themselves, but also in their co-workers, and in people with whom they come in contact. Why? Because it is important that feelings be acknowledged and that you support those around you. If you suspect that you, a co-worker, or a client may be experiencing burnout, take (or recommend) the following steps:

- Decide what is causing the problem. Look toward, not away, from problems and feelings.
 Once you identify the cause, it will be easier to work out a solution.
- Learn to accept what cannot be changed.
 Everyone has some control over themselves. No person has control over everything.
- Accept the fact that occasionally everyone makes mistakes and that no person is right all the time. A mistake does not reduce a person's value.
- 4. Share your concerns with someone else—someone you love, trust, or respect.
- 5. Get enough exercise.
- 6. Avoid self-medication. Alcohol or pills will not help you to cope.
- 7. Avoid self-pity by doing something for someone else.
- 8. Avoid loneliness.
- 9. Try a temporary diversion.
- 10. Create a plan of action for solving problems by taking active management steps.
- 11. Assess your priorities.
- 12. Have a physical checkup to eliminate the possibility of physical illness.
- 13. Get the support of your family and friends.
- Learn to love and appreciate yourself for your unique contributions and abilities.

Remember, you are capable of doing all these things to control burnout. Remember also to help your co-workers and clients take similar steps when burnout threatens.

SCREENING CLIENTS

One of your basic responsibilities will be to screen the persons who request appointments. To do this, you will need to obtain some basic background information concerning each client. The information you will obtain will vary according to the needs of the individual chaplain.

At a minimum, you will need to obtain the following information:

- The full name of the visitor
- The rank, rate, or dependency status of the visitor
- The activity to which the visitor or the visitor's sponsor is assigned
- A complete work address
- The correct telephone numbers
- A careful exploration of the purpose of the visit, such as personal, military, financial, spiritual, or general assistance

Even when you obtain the minimum information, always be aware of your responsibilities for confidentiality and for treating each client with dignity.

MAINTAINING A COMPLETE LOCAL REFERRAL DIRECTORY

The purpose of an information and referral directory is to link people in need to the available local sources that can provide the services they require. A directory can be an invaluable tool to Navy chaplains in their efforts to assist Navy and Marine Corps personnel and their families in meeting and overcoming the problems that they may encounter during periods of stress, illness, crisis, and other emergencies.

One of your main responsibilities will be to assist the chaplain by compiling, maintaining, and providing up-to-date information for this directory. The contents of the directory should include applicable Navy, Marine Corps, and civilian programs, facilities, and organizations that can provide services for your clients. The effectiveness of the directory will largely depend upon your efforts to compile and maintain it. In most geographic areas, you should be able to find out about the local agencies and facilities that can provide services to Navy and Marine Corps members and their families.

When creating a directory, be certain to contact the Navy and Marine Corps family service centers. These centers can give you excellent advice and information you can use to create an effective, comprehensive directory. Figure 2-3 shows the type of information you should include for each of the resources in your directory.

In addition, you can organize other types of information that will help Navy and Marine Corps personnel and their families. Remember, many different issues will lead Navy and Marine Corps personnel and their families to seek assistance from the Office of the Chaplain. You can organize this important information in a well-defined command, deployment, ombudsman, or family support guide. Figure 2-4 is an outline of a support guide that you might prepare to promote this type of program.

UNDERSTANDING SPECIAL PROBLEMS

In your career as an RP, you will discover that some of the most pressing issues that lead personnel and families to seek assistance include separation and deployment; alcohol and drug dependency; services for single members, families, and children; retirement and aging; and resources management services. In developing and maintaining an effective, comprehensive directory and maintaining a sensitive and caring attitude, you will play a major role in helping many people get through these difficult situations. Let's take a closer look at some of the special problems facing military people and their families.

Separation and Deployment

The deployment of Navy and Marine Corps personnel aboard ships at sea and field exercises is a routine occurrence. Deployments often result in long, frequent, and repeated family separations. In many cases, direct communication with family members may not be possible.

When problems associated with deployment and family separations occur, the Navy chaplain will stand

- Legal name of agency
- Address
- Telephone number
- Military or civilian benefit programs accepted by the agency
- Eligibility requirements

ready to assist both the deployed member and the deployed member's family. Normally, such assistance will take the form of pastoral counseling or referral assistance.

As an RR you will play a profound role in helping your chaplain and the Navy and Marine Corps personnel of your command and their families prepare for deployment and postdeployment events. In helping military persons and their families cope with deployment and postdeployment stress, you should have a working knowledge of the following contact persons, agencies, and resources:

- The deployed unit or home port contact officer who provides families of deployed members assistance in times of emergency. The contact officer circulates information at regular intervals to the ombudsman and other representatives of each deployed unit.
- The ombudsman who serves as a liaison with officials of the Navy for the families of Navy personnel. The *Navy Family Ombudsman Program*, OPNAVINST 1750.1, contains detailed information concerning the family support program.
- The American Red Cross (ARC), an organization funded by voluntary contributions. The work of the ARC is carried out primarily by volunteers. There are more than 3,000 chapters in communities throughout the United States, at military installations, in hospitals worldwide, and at Department of Veterans Affairs offices. The ARC provides counseling in relation to personal and family problems; maintains family ties; assists service members and military authorities in providing information regarding leave, reassignment, and discharge by providing reports about emergencies; gives financial assistance to meet emergency needs; provides information concerning community services; assists patients in military hospitals; and assists veterans, their dependents, and survivors in preparation of government benefits. In addition, the ARC works closely with the Navy and Marine Corps Relief Society.
 - Application procedure
 - Length of waiting list
 - Branch office locations
 - Name and phone number of contact person or persons
 - Name and phone number of administrator

Figure 2-3.—Information inclusive to an information and resource directory.

AN OVERVIEW

An overview at the beginning of your support guide is intended for those individuals who may find it difficult to read or consume all that is given in the support guide. If a person or family does nothing else, they should prepare the items outlined on this page.

Check the RECORD OF EMERGENCY DATA (Service Record Page 2). Be sure it is correct.

Check the BENEFICIARIES. Are they correct and up to date, including servicemen's Group Life Insurance (SGLI) and personal insurance policies?

Are the DEPENDENT ID CARDS AND DEERS enrollment current and in good condition? Think ahead, will they expire during periods of separation or deployment? This can effect medical and dental benefits.

Are service member's and spouse's WILLS in order?

Does the service member have current POWER OF ATTORNEY (general or specific) for the spouse?

Has the service member completed a NAVY AND MARINE CORPS RELIEF AUTHORIZATION FORM for the spouse?

Has the service member explained to the spouse EMERGENCY PROCEDURES to be followed? Navy and Marine Corps Relief Society, Ombudsman, Red Cross, Chaplain... these are important tools for a spouse to know during the service member's absence!

Does the spouse know the service member's SOCIAL SECURITY NUMBER?

AUTOMOBILE LICENSE AND REGISTRATION. Are they current or will they expire during a separation or deployment?

PAY DIRECT DEPOSIT and ALLOTMENTS. Start them well in advance of a departure.

GENERAL SERVICES AVAILABLE

Provide accurate telephone listings of most frequently used numbers both civilian and military. Provide maps of bases and the area indicating the location of key referral human resource centers.

Provide an alphabetical listing of organizations and/or offices used. The hours of operation should be given for general guidance only. You may include Armed Services YMCA, Office of the Chaplain, chapel Services, Commissary, Counseling and Referrals, Credit Union, Navy Family Service Center, Household Moves - Personal Property, Housing Office, Jobs, Legal Service, Library, Medical and Champus, Morale Welfare and Recreation, Navy Exchange, Navy and Marine Corps Relief, Navy and Marine Corps Relief Thrift Shop, Nursery - Child Care, Ombudsman, Personal Services Center, Personnel Support Detachment, Poverty Programs, State and Local Government Community Services, SATO, Security - Fire - Police Services, Service Station, Transportation, and Spouse Organization.

PREDEPLOYMENT CHECKLIST

Provide a complete fill in the blank checklist for service member; a family checkoff list; general information concerning military member, spouse child(ren) and other dependents; location of important papers; location of family records; legal information such as wills and insurance; special information such as property ownership, automobile, other personal property, bank accounts, safety deposit box(es); loans and credit; and routine home problems checklist.

Figure 2-4.—Outline of a support guide.

COMMUMCATIONS

Provide guidelines for letter writing, with acceptable rides to follow; the postal guidelines for packages, the sending of emergency messages particularly important messages and telephone calls; MARS ham radio availability; and the ombudsman's telephone tree.

THE FAMILY CAR

The family car is very critical especially during periods of deployment and separation. An automobile needs certain normal maintenance procedures that are designed to prolong its life and significantly decrease breakdowns. Depending on the type and make of car, repairs can be extremely costly, nerve racking, and time-consuming, as well as inconvenient. In your support guide, provide a fill in the blank application form for maintenance information; a maintenance checklist; what can be done in cases of emergency passes, decals, and stickers; what can be done for certain dilemmas such as starting difficulties, flat tires, running out of gas, frozen fuel lines, keys locked in the car, radiator boilover, and frozen door locks.

CHALLENGES AND OPPORTUNITIES

As an aid to emotional adjustments due to separation from spouse, parent, and/or children that may lead to feelings of loneliness and isolation, provide a list of personal growth opportunities. As family members discover new sources of strength and support in themselves and others, you might include suggestions for making emotional adjustments; taking on added responsibilities; taking good care of oneself; taking good care of children; seeking help when needed; and practicing religious beliefs and convictions during periods of separation.

HELPFUL HINTS ON PERSONAL PROTECTION

Provide suggestions and guidelines on personal safety family members can use in a variety of circumstances including being at home alone; before departing on a trip, when out of the house alone; accident prevention and personal protection at home; accident prevention and personal protection in the car; accident prevention and personal protection in babysitting situations; personal protection measures if confronted; and general tips for coping with periods of deployment; specific tips for couples with children and those without children; participation in command videotape recordings; and sending snapshots to each other.

POSTDEPLOYMENT STRESS

The period following the excitement of the end of deployment and the reuniting of the family is one of the major readjustments for the Navy family. It calls for serious reorganization of roles, feelings, and behaviors under which the family has been operating as a separate unit for the past several months. Of critical importance is the normalizing of the husband-wife relationship in terms of home, finance, discipline, and mode of child rearing.

Counselors who work with military families say that few couples can resume their marriages after along separation without some problems. Other counselors go even further and say that a separation is always a crisis in marriage. The first 2 months back are normally very critical. Therefore, you should provide in your support guide information about family roles; good communications; new friendship the children and authority; and what to expect during the first week.

Separations will never be fun. But neither do they have to be a disaster. The keys to survival are simple: cultivate the right attitude; be supportive of the military member; keep the military member before the children daily, and plan together for the return; retain one's faith; keep up communications within the family; let the separation make your marriage even better...grow through it; and use the time to make you and your marriage better and stronger.

Figure 2-4.—Outline of a support guide—Continued.

• The Casualty Assistance Calls Program (CACP) that aids Navy and Marine Corps families in the event of death, serious injury, or capture of a Navy or a Marine Corps member in the line of duty. The Navy and Marine Corps will detail a casualty assistance calls officer (CACO) to notify personally the next of kin. The CACO will assist the spouse or primary family member of a deceased service member in any way possible, including transportation, child care, and funeral arrangements, and submitting claims for survivor's benefits. The program is administered by the Casualty Assistance Branch of the Bureau of Naval Personnel and is governed by the Navy Casualty Assistance Calls Program, NMPCINST 1770.1, and the Casualty Assistance Calls and Funeral Honors Support Program Coordination, OPNAVINST 1770.1. Chaplain involvement in the CACP is described in the Religious Ministries in the Navy, OPNAVINST 1730.1. The Marine Corps casualty assistance program is administered by the Casualty Section, Personal Affairs Branch, Human Resource Division, Headquarters United States Marine Corps, and is governed by the Marine Corps Casualty Procedures Manual, MCO 3040.4.

• The class easy message of getting important personal messages to deployed or overseas members. This is a telegram method of rapid communication families can use to send important messages—not just emergency messages—to a Navy or Marine Corps member. Either a regular telegram of 15 words or a night letter of 50 words maybe sent to deployed Navy

and Marine Corps members through Western Union at favorable rates. A spouse or parent who needs to send an important message may contact a deployed member by sending a telegram to the deployed member's name and rank or rate, name and hull number of the deployed member's ship or unit, c/o Naval Communications Station, Washington, DC. me communications station will send the telegram to the ship. The cost of the telegram will be the regular Western Union rate from the place of origin to Washington, DC.

Remember, emergency communications intended for all deployed military service members are channeled through the nearest chapter of the ARC. For this reason, you must encourage service members to let their family members know about this service and to have the service member's name and rank or rate, social security number, name and hull number of the member's ship or unit, as well as any other pertinent information ready to expedhe the ARC's handling and delivery of the message.

Single Members, Families, and Children

In both the Navy and the Marine Corps, single members and single parents, their families and children, will have many different special needs. Some of the programs and services that can help single parents and their families are listed in figure 2-5.

Alcohol and Drug Dependency

Alcohol and drug dependency is a serious problem for many people. Chaplains are called upon to provide

CHILD CARE CENTER SERVICES

Most child care centers evolve from local needs. Each center usually has its own structure and program based upon the nature of the community it serves, its source of funding, the building it inhabits, and the qualifications of its staff.

The Recreation Services Division of the Bureau of Naval Personnel is responsible for the overall policy and guidance of Navy child care centers. Presently, many Navy and Marine Corps installations provide some child care facilities; however, these facilities may not be large enough to provide for all the child care needs of the military community. Various types of child care facilities can usually be found in the local community that may be used in addition to an on-base child care facility.

DEPARTMENT OF DEFENSE DEPENDENTS SCHOOLS

Department of Defense Dependents Schools (DODDS) is the only United States school system that has schools located around the world.

Figure 2-5.—Programs available to single servie members, single parents, families, and children.

EXCEPTIONAL CHILDREN - HANDICAPPED AND GIFTED

Finding help for children with special needs is often difficult. Parents may consult the chaplain for guidance and referral assistance. The military resources that are available to parents of exceptional children include the Family Service Center, Champus Program for the Handicapped, and military physicians. Additional community resources may include Community Chest, Community Council, Community Planning Council, Community Services, Counseling Clinics, Counseling Services, County Department of Health, County Mental Health Association, Family Counseling Service, Family Services, Family Service Association, Health and Welfare Council, Information and Referral Service, Mental Health Clinic, United Fund, or United Way.

CHILD AND FAMILY ADVOCACY PROGRAMS

The Family Advocacy Program identifies, evaluates, intervenes, treats, and prevents cases of abuse, neglect, sexual assault, and rape of spouses and children in Navy and Marine Corps families. BUMEDINST 6320.7 provides information regarding the Family Advocacy Program.

FAMILY AND PERSONAL ENRICHMENT PROGRAMS

Personal and family enrichment activities include any service or program that helps to strengthen and develop the lives of single service members, family members, or families as a whole. Such programs help people to feel good about themselves and their relationships with each other. Family Service Centers develop and/or maintain a list of the personal and family enrichment programs available within the military and civilian communities. Several programs dealing with personal and family enrichment are Chaplains Religious Enrichment Development Operation (CREDO), Parent Effectiveness Training, Family Service Association of America and Marital and Family Counseling Services.

UNITED SERVICE ORGANIZATIONS

The United Service Organization (USO) provides homelike facilities in the form of recreation centers, airport lounges, information desks at train stations, bus stations, and airports since 1941. The USO offers lonely or homesick service members a unique opportunity to relax and meet people in the community.

Figure 2-5.—Programs available to single servie members, single parents, families, and children—Continued.

pastoral counseling and referral assistance to military members and their families who are facing problems of this nature.

Your primary role is to support and assist your chaplain in his or her efforts to provide assistance to military members and their families who are dealing with substance abuse and dependency problems. Your responsibilities will include compiling and maintaining a current list of available Navy, government, and civilian agencies, including promoters of needs and recovery programs, that can provide help to alcohol- and

drug-dependent military personnel and their families. Your list should contain a record of the key personnel and contacts within these agencies and programs. Also, you should maintain a close working relationship with these key persons.

NAVY PROGRAMS.— The core elements within the Navy's alcohol and drug dependency program are the Navy Alcohol and Drug Abuse Program (NADAP), the Navy Alcohol Safety Action Program (NASAP), and the Civilian Employment Assistance Program (CEAP).

RESOURCES MANAGEMENT SERVICES.—

Human resources management centers (HRMCs) and human resources management detachments (HRMDs) are concerned with the full range of human development areas and problems. These groups provide programs in alcohol education and alcoholism prevention, race relations, drug education and drug abuse control,

organizational development, and overseas diplomacy. HRMCs and HRMDs also assist local commanding officers in identifying problem areas and providing education, training, patient referral, and local drug and alcohol rehabilitation programs. Figure 2-6 shows the key persons associated with alcohol and drug abuse programs.

DRUG AND ALCOHOL PROGRAM ADVISOR

The drug and alcohol program advisor (DAPA) serves as an advisor to the commanding officer regarding drug and alcohol use and abuse within the command. In the Marine Corps, the drug and alcohol control officer (DAACO) serves in a similar capacity. The DAPA serves as a coordinator concerning all drug and alcohol education, rehabilitation, identification, and enforcement efforts within commands.

COLLATERAL DUTY ALCOHOLISM ADVISOR

The collateral duty alcoholism advisor (CODAA) assists commands with programs that address alcoholism and alcohol abuse. Within the Marine Corps, a similar function is performed by the collateral duty alcoholism counselor (CODAC). CODAAs or CODACs provide assistance in identification of problem drinkers and available resources, act as a liaison with local Alcoholics Anonymous (AA) groups, assist recovering alcohols, and act as a contact point to problem drinkers for alcohol resource and referral information.

COUNSELING AND ASSISTANCE CENTER COUNSELORS

Counseling and Assistance Center (CAAC) Counselors (SNEC 9522) and Alcoholism Treatment Specialists (SNEC 9519) are cross-trained in both drug and alcohol abuse counseling. These counselors and specialists provide educuation, counseling, and referral services to individuals identified as drug or alcohol abusers.

MEDICAL OFFICERS

The medical officer receives walk-in patients and referrals from the DAPA, DAACO, or other referral sources. Medical officers make a diagnosis of alcohol or drug abuse and refer the person to a resource other than a rehabilitation facility.

CIVILIAN EMPLOYEE ASSISTANCE PROGRAM ADMINISTRATOR

The Civilian Employee Assistance Program (CEAP) provides assistance to civilian employees who have problems with alcoholism and drug dependency. A chaplain may be called upon to assist a civilian employee with a work-related alcohol or drug dependency problem, particularly if the employee is a retired Navy or Marine Corps member. The program administrator is part of the Human Resources Office (HRO). The HRO can assist chaplains by providing current information regarding the CEAP, essential information regarding civilian employees, or identification of community resources available

OTHER RESOURCE PERSONNEL

Other people who should be included within the alcohol and drug portion of the resource directory may include human resource management detachment personnel, health benefits advisor, family service center (FSC) staff chaplain, FSC information and resource specialist, and Navy clinical social work officer.

The following civilian resource persons should be included: local VA representative, community and state drug and alcohol program representatives, local volunteer agency representatives such as AA, civilian clergypersons available for family counseling of alcohol-and drug-dependent persons, local private alcoholism and drug dependency rehabilitation program directors, as well as other resource persons considered appropriate.

Figure 2-6.—Key persons associated with alcohol and drug abuse programs.

Each of these people can play a very important role in identifying and rehabilitating alcohol- and drug-dependent military or civilian personnel. An understanding of their roles and how they interrelate within the Navy and Marine Corps alcoholism and drug dependency rehabilitation and prevention programs will enable you to compile and maintain appropriate reference material that will be useful to your chaplain in the area of alcoholism and drug abuse.

Retirement and Aging

Large communities of military retirees form in areas where there are complexes of Navy and Marine Corps installations and facilities. Chaplains in these areas are often called upon to render counseling and referral assistance to retirees and members of their immediate families for the special stresses associated with retirement and aging. Because retirement can produce a major life crisis for any person, members facing retirement may be at risk for several different types of stress- and anxiety-related disorders. For the aged, problems may include diminishing health, fixed income, self-preservation, and security.

Retiree affairs and problems associated with retirement are handled by a wide variety of military and civilian agencies. If assigned to a station or unit where there are large numbers of retired or elderly members in the community, you should make certain you are aware of the available human resources agencies and programs that can provide services for these types of clients. Figure 2-7 provides a listing by category of several agencies that can help your clients through the stresses related to retirement and aging. It will be your responsibility to maintain up-to-date files on each of

NAVY AND MARINE CORPS

Retired Affairs Offices (RAOs)

Bureau of Naval Personnel, Washington, DC

Headquarters United States Marine Corps,

Washington, DC

Retired Activities Section

Survivor Benefit Plan

The Navy Guide for Retired Personnel and Their Families (NAVPERS 15891E)

The Marine Corps Retirement Guide (NAVMC 2642)

Naval Reserve Personnel Center, New Orleans,

Louisiana

Marine Corps Reserve Forces Activity, Kansas City, Missouri

The United States Naval Home, Gulfport, Mississippi Defense Finance and Accounting Centers, Cleveland, Ohio

FEDERAL AGENCIES

Administration on Aging (AOA)

Social Security Program

Retirement Benefits

Survivor Benefits

Disability Benefits

Medicare and Medicaid

Department of Veterans Affairs

Medical Benefits

VA Homes

DIRECT SERVICES TO THE ELDERLY

Homemaker Service

Home Maintenance Service

Transportation

Retired Senior Volunteer Programs

Community Recreation Programs

Education Programs

Legal Counseling Programs for the Elderly

National Senior Citizens Law Center, Los Angeles,

California

National Resource Center for Consumers of Legal

Services, Washington, DC

Nutrition Programs

Meals on Wheels

Congregate Meal Programs

Food Stamps

Nursing Homes

Elderly patients

Chronically ill patients

Convalescent patients

Patients who are invalids

Local Department of Health

American Nursing Home Association

American Association of Homes for the Aging

National Organizations for Older People

American Association of Retired Persons/National

Retired Teachers Association (AARP/NRTA)

National Council for Senior Citizens

National Association of Retired Federal Employees (NARFE)

Gray Panthers

Figure 2-7.—Agencies associated with programs for the retired and aged.

these categories. Be prepared to devote a considerable amount of your time and attention to making sure these files are complete and up to date. Remember, the percentage of retired and elderly persons in our society is steadily increasing. The retired and elderly may constitute a significant percentage of the clientele seeking help at your religious ministries facility (RMF).

In your career, you will encounter many different types of people. Some of these people will be trying to cope with tragic and traumatic circumstances. The information in the following paragraphs should help you understand your role of assisting your chaplain in these events.

PROVIDING ASSISTANCE TO DISTRAUGHT PERSONS

People spend their time, energy, and means setting up their lives in a certain way. When a crisis takes place,

many plans and hopes are disrupted and altered, perhaps forever. Change is dreadfully trying for some people. When change occurs, people will often turn to a Navy chaplain for help. The reactions people will have to changes, certainly to unanticipated and sudden ones, will vary widely.

As an RP, you will inevitably be in a situation in which you must deal with distraught or overwrought persons. Types of RMF encounters—routine, ceremonial, and dramatic-are outlined in figure 2-8. You should be able to recognize these situations by their descriptive terms.

Routine and ceremonial encounters will seldom require any radical decision-making responses on your part. Dramatic encounters, however, are another story. In dramatic encounters, you will deal with people in extreme crises. In general, these people will be reacting to a condition that has deprived them, or is threatening

ENCOUNTER TYPES	DESCRIPTIVE TERMS	EXAMPLES
ROUTINE	Simple Easy Just another client Our bread and butter	Straightforward visit Readily available solutions Personal spiritual renewal Reassurance Habitual performance of an ordinary, established procedure
CEREMONIAL	TRANSITION Schedule busters Hidden time bombs MAINTENANCE Always the same Friendly Hopeless	By the way Surprise! Brief visit, unplanned—by the chaplain Chain reaction to events Seeks hope A transitional ceremony occurs when a new drama emerged in a brief visit providing an opportunity to lessen anxiety Follow-up visit Seeks new advice, but does take previous advice A maintenance ceremony occurs after a drama ends and reasoning has returned
DRAMATIC	Complicated Difficult Trouble Along-playing record	Crisis time Bad news Family discord Suicidal Those encounters occurring over time and involving conflict(s) or intense emotion(s) or both

Figure 2-8.—Types of RMF encounters.

to deprive them, of someone or something representing the fulfillment of their basic human needs. In other words, these people will not be experiencing a content, sound life-style with the basic human needs fulfilled. For these people, an important part of life is missing, such as a sense of identity and belonging to society, a sense of physical and psychological well-being, or a supportive network of family and friends. In dramatic encounters, people may be facing a period of impact or an unwelcome truth, a period of recoil where they isolate themselves, and a period of posttraumatic self-denial or remorse. Although these crisis states are not inevitable in every emergency, they are common occurrences whenever people are facing traumatic or devastating events.

Recognizing a Psychological Emergency

You may not always be able to immediately identify a state of serious emotional upset, but you should be able to recognize some common signs and characteristics of a psychological emergency, such as those listed in figure 2-9.

A crisis may occur at any time. A crisis may erupt from any event, such as an environmental or material condition, a personal or physical event, an interpersonal or social situation, during any life cycle passage associated with the normal facets of human growth, and during life cycle transitions that signal a change in social status.

The key to recognizing and understanding a psychological emergency resulting from a crisis is the term *emotional*. People have feelings about the things that happen to them in life. These feelings can incapacitate them. Most people prefer to be in charge of their own lives and hate to admit they cannot cope.

SIGNS AND CHARACTERISTICS OF PSYCHOLOGICAL EMERGENCIES

One or more of the characteristics may signify a psychological emergency. These characteristics may be accompanied by bodily signs and symptoms such as sleeplessness, loss of appetite, loss of sex drive, constipation, crying tension and irritability

crying, tension, and irritability.	
ANGER	Inappropriate anger directed at an inappropriate source usually brief but destructive.
ANXIETY	Not related to any specific person, place, or situation.
BEHAVIORAL DEVIANCE	Radical changes in life-style, values, relationships, and so forth.
CONFUSION	May be preoccupied with fears or imaginary attacks.
DEPRESSION	May range from crying to inability to function to threatened suicide. Often has feelings of hopelessness, helplessness, unworthiness, and guilt.
FEAR	May be afraid of a person or persons, activity, or place.
LOSS OF CONTACT WITH REALITY	Has trouble distinguishing or identifying smells, sounds, and sights in the real world from those in an imaginary world.
MANIA	Unrealistically optimistic, unwarranted risks, and poor judgment.
WITHDRAWAL	Loses interest in people or things that were previously considered important.

Figure 2-9.—Signs and characteristics of psychological emergencies.

Responding to Psychological Emergencies

When reality strikes and coping is no longer a choice, trained chaplains react appropriately. You, too, must act appropriately. Often it will be your

reaction, your nonthreatening manner, and courtesy, as well your tone of voice that will mark true compassion in guiding an overwrought person to a calmer demeanor. Figure 2-10 offers some insight and guidelines you can use in responding to situations involving distraught persons.

Act promptly.	Become a sharp onlooker.	Be prepared to spend time on the situation.
Be as calm as possible.		Isolate the person to a private room, or seek the assistance of a coworker if you fear violence.
Ask specific questions to help you measure the person's level of reality.	Avoid asking questions that can be answered with a simple yes or no.	Communicate confidence in yourself and move with assurance. You must be in control.
Once the person has told you his or her story, briefly go over it again to make sure you understand. Clear up any points that are vague.	Look at the person's eyes throughout the conversation; they can often tell you what is going on in his or her mind. A patient's eyes can reflect his or her emotions and can tell you whether he or she is terrified, confused, struggling, in pain, or dying.	and treat the person as though you
Never be judgmental.	Be genuine and honest.	Make a definite plan of action.
Do not force the person to make decisions because he or she may have lost the ability to cope effectively.	Encourage the person to participate in a motor activity; it helps to reduce anxiety.	Consider the person to be an escape risk; stay with the person at all times.
may seem intolerably long, but	As you talk to the person, encourage him or her to communicate. Remain interested, and let the person see that you would like to learn more.	
Maintain a respectful distance between you and the person.	Do not abuse or threaten the person.	Do not allow the person to get you angry.
If the person is severely disturbed and has become violent, it may be necessary to restrain him or her.	Make every effort to explain to the person his or her situation. A person may be more anxious and fearful because he or she is uncertain about what is going to happen to him or her.	Find out if the person has been given psychiatric care before the present emergency. If so, contact the therapist.
	Sound to imploit to initi of their	Make detailed notes for medical as well as legal reasons. Note carefully what you did for the person.

Figure 2-10.—Guidelines in dealing with distraught persons.

You can prepare yourself for many emergencies. Some excellent training sources you can use are a basic first aid training course, a cardiopulmonary resuscitation (CPR) course, a litter-bearer training course for nonmedical personnel, and the *Standard First Aid Training Course*, NAVEDTRA 12081.

It will be reassuring to you that people will often respond positively to your efforts to help. Many people, following an emotional or emergency encounter, will handle their dilemma with dignity and grace and often react with gratefulness. Some may even find humor in the situation and their reactions will even tend to lighten the intensity of the condition. Because you cannot predict every person's reaction to a traumatic event, you must be prepared to deal with a variety of possible responses. Being prepared to handle the broad range of possible human responses to a crisis will help you to develop your own perspective about your rating and your job and to become a better RP.

ESCORTING CHAPLAINS DURING FAMILY VISITS

In the chaplain's business to provide a personal service to a Navy or Marine Corps member's family, it may be necessary to call upon a client in the home or some neutral place. Often, the nature of a pastoral or counseling visit may place a chaplain in a delicate situation, and the chaplain may call upon you to accompany him or her during the visit. At these times, your role is to be the chaplain's confidant or confidante, support person, team member, or witness to ensure the honesty of the moment.

For whatever reason, you will be in a position to hear personal, confidential information. Be discretely alert, nonjudgmental, and silent but supportive to your chaplain. The occasion may even require that you simply be there; to play with a child, children, or an animal; to attend to an elderly person; or to care for an afflicted or impaired person.

Upon completion of the visit, review in private your observations with the chaplain. After all, the chaplain may not have had the same observations. After this private review, the whole episode must be forgotten.

PREPARING DAILY CENSUS REPORTS ON HOSPITAL AND BRIG PERSONNEL ASSIGNED

People entering hospitals and brigs need to know immediately that someone cares about them. If soon after entering the hospital or the brig, a person can see that the chaplain is there, the chaplain's visit can make a importance difference in that person's life. One of your primary responsibilities is to keep your chaplain informed and up to date about these people.

To be able to keep your chaplain informed, it will be necessary for you to become a liaison person with the administration personnel of military and civilian hospitals and brigs. Staying on top of this responsibility requires time and patience. Eventually, you must develop your own method for staying on top. Remember, any method you use will require your daily attention. Figure 2-11 shows a form you can use to develop your own method. You can use this form to account for an individual person or incident or multiple persons or incidents, whichever is most helpful to you.

Up until now, we have talked about your responsibilities for pastoral care and counseling. As you probably realize, you must be aware of your role to assist your chaplain as he or she ministers to needs of people who are experiencing some type of adverse or stressful circumstance. In the following sections, however, you will read about some of your duties in providing assistance to your chaplain in other types of events and programs, those especially involving the routines of fellowship.

FELLOWSHIP

Today, we express fellowship as a custom; a custom of shared bonding. Fellowship, therefore, is a ministry of communal hospitality. If fellowship is a ministry, then RPs must be as serious about the ministry of communal hospitality as they are about the ministry of worship.

As an RP, one of your most important jobs will be to support your chaplain in his or her efforts to provide fellowship. Your role will involve the following four distinct areas of responsibility:

- 1. Diagraming chaplain support requirements
- 2. Providing supplies and materials
- 3. Rigging and unrigging for fellowship activities
- 4. Recruiting, training, and supervising volunteers to assist in fellowship activities

In the following paragraphs, we will take a look at each of these areas.

DIAGRAMMING CHAPLAIN SUPPORT REQUIREMENTS

In diagramming chaplain support requirements, one of your jobs will be to design the blueprint for fellowship programs. Designing the blueprint for fellowship programs requires a knowledge of all aspects of what is expected from start to finish.

Figure 2-12 illustrates a program plan showing what diagramming for fellowship may look like. Make your diagram of the fellowship activity a program plan that follows a step-by-step general approach. Your plan should include scheduling and determining milestones, planning for supplies and materials, and evaluating logistics requirements.

PROVIDING SUPPLIES AND MATERIALS

Quality control and reliability in planning for supplies and materials for fellowship programs should be documented in your program plan. The fellowship program plan, such as the one outlined in figure 2-12, will become a tool of ground rules and guidelines for you and other RPs to use to manage fellowship programs. To develop your plan, you must perform a total task identification. Include every possibility as well as a cost analysis. Let the chaplain or fellowship program coordinator determine what is essential and what is not. The effectiveness of the fellowship program will develop from that point.

HOSPITAL	BRIG
URGENT ROUTINE	MILITARY BRIG:
MILITARY HOSPITAL NAME: COMMAND: RANK/RATE/STATUS: WARD: ROOM NUMBERER: TELEPHONE: EXPECTED LENGTH OF HOSPITALIZATION: OTHER INFORMATION: such as reason for hosptalization, prognosis, relative contacted, religious preference DATE CHAPLAIN VISITED: COMMENTS:	NAME OF SERVICE MEMBER OR INDIVIDUAL: COMMAND: RANK/RATE/STATUS: TELEPHONE: EXPECTED LENGTH OF INCARCERATION: OTHER INFORMATION: such as reason for detention or relative contacted DATE CHAPLAIN VISITED: CHAPLAIN'S COMMENTS:
URGENT ROUTINE CIVILAN HOSPITAL: NAME: COMMAND: RANK/RATE/STATUS: WARD: ROOM NUMBER: TELEPHONE: EXPECTED LENGTH OF HOSPITALIZATION: OTHER INFORMATION: such as reason for hospitalization, prognosis, relative contact, religious preference DATE CHAPLAIN VISITED: CHAPLAIN'S COMMENTS:	CIVILIAN JAIL OR PRISON: ADDRESS: TELEPHONE: CONTACT PERSON: NAME OF SERVICE MEMBER OR INDIVIDUAL: COMMAND RANK/RATE/STATUS TELEPHONE: EXPECTED LENGTH OF INCARCERATION: OTHER INFORMATION: such as reason for detention or relative contacted DATE CHAPLAIN VISITED: CHAPLAIN'S COMMENTS:

Figure 2-11.—Daily census report on hospital and brig personnel.